Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

117/48

| CLAIMS AS FILED - PART I  (Column 1) (Column 2)                        |  |  |                                   |                               |                              |  |   | SMALL ENTITY TYPE                   |                        |               | OTHER THAN OR SMALL ENTITY |                        |  |
|--|--|--|-----------------------------------|-------------------------------|------------------------------|--|---|-------------------------------------|------------------------|---------------|----------------------------|------------------------|--|
| TOTAL CLAIMS   |  |  | 6.                                |                               |                              |  | Ĺ | RATE                                | FEE                    |               | RATE                       | FEE                    |  |
| FOR  |  |  | NUMBER FILED                      |                               | NUMBER EXTRA                 |  | E | BASIC FEE                           | 375.00                 | OR            | BASIC FEE                  | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |  | 6 - minus 20=                     |                               | *6                           |  | ſ | X\$ 9=                              |                        | OR            | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS   |  |  | 2 - minus 3 =                     |                               | * O                          |  | ļ | X42=                                |                        | OR            | X84=                       |                        |  |
| MU   | LTIPLE DEPEN   | DENT CLAIM P   | RESENT                            |                               |                              |  |   | +140=                               |                        | OR            | +280=                      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column |  |  |                                   |                               |                              | olumn 2                                | L | TOTAL                               |                        | OR            | TOTAL                      | 710.                   |  |
| CLAIMS AS AMENDED - PART II  |  |  |                                   |                               |                              |  |   |                                     |                        |               | OTHER THAN                 |                        |  |
|  |  | (Column 1)   | (Colum                            |                               |                              | (Column 3) SMALL                       |   | SMALL                               | NTITY                  | OR            | SMALL                      | NTITY                  |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                                   | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA                       |   | RATE                                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus                             | **                            |                              | =                                      |   | X\$ 9=                              |                        | OR            | X\$18=                     |                        |  |
|  | Independent  | *  | Minus                             |                               |                              | =                                      |   | X42=                                |                        | OR            | X84=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                         |  |  |                                   |                               |                              |  |   | +140=                               |                        | OR            | +280=                      |                        |  |
|  |  |  |                                   |                               |                              |  |   | TOTAL                               |                        | OR            | TOTAL<br>ADDIT. FEE        |                        |  |
|  |  | (Column 1)   |                                   | (Colu                         | mn 2)                        | (Column 3)                             | ^ | DDIT. FEE                           |                        |               | ADDII. FEE                 |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                                   | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                       |   | RATE                                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus                             | **                            |                              | =                                      |   | X\$ 9=                              |                        | OR            | X\$18=                     |                        |  |
|  | Independent  | *  | Minus                             | ***                           |                              | =                                      |   | X42=                                |                        | OR            | X84=                       |                        |  |
| <u> </u>   | FIRST PRESE  | NTATION OF M   | ULTIPLE DEI                       | PENDEN                        | CLAIM                        |  | ¹ | +140=                               |                        | OR            | +280=                      |                        |  |
|  |  |  |                                   |                               |                              |  | L | TOTAL                               |                        |               | TOTAL                      |                        |  |
|  |  | (Column 1)   |                                   | (Colu                         | mn 2)                        | (Column 3)                             | А | DDIT. FEE I                         |                        |               | ADDIT. FEE                 |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                                   | HIGI<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                       |   | RATE                                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus                             | **                            |                              | =                                      |   | X\$ 9=                              |                        | OR            | X\$18=                     |                        |  |
| AME  | Independent  | *  | Minus                             | ***                           |                              | =                                      | 1 | X42=                                |                        | OR            | X84=                       |                        |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                   |                               |                              |  |   | +140=                               |                        |               | .000                       |                        |  |
| *  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |                                   |                               |                              |  |   |                                     |                        | OR            | +280=<br>TOTAL             |                        |  |
| **   | If the "Highest Nu<br>If the "Highest Nu   | mber Previously P<br>Imber Previously F<br>Inber Previously Pa | aid For" IN TH<br>Paid For" IN TH | IS SPACE                      | is less that is less that    | an 20, enter "20."<br>an 3, enter "3." | ^ | TOTAL<br>DDIT. FEE<br>nd in the app | propriate bo           | OR<br>k in co | ADDIT. FEE                 |                        |  |